State of Nevada

Michelle -	Trusky-Murch	State Bo	ard of a	Ed 3
Candidate's Name(print)		ice	U	District (if applicable)
1570 Shirlu	Street : me	nden, NV	89423	(775)217-3515
Mailing Address (include city and				Telephone Number
CT 30 P 2: 59 FILED ARSON CITY NEVADA			000 01	5, 2001
1. Tom Report Numbers 12	and 2, total amount of c	ontributions in exc	cess of \$100	330.00
2. From Report Numbers 1	and 2, total amount of	contributions of \$1	.00 or less	475.00
3. Report Number 3, total a	mount of contributions	in excess of \$100		
4. Report Number 3, total a	mount of contributions	of \$100 or less		
From Report Numl	bers 1, 2, and 3, actual 1	number of		
contributions of \$1	00 or less) \	<u></u>		
6. Interest and income earne	d, if any, during this rep	ort period		
7. TOTAL AMOUNT OF	ALL CONTRIBUTION	ONS		
(add lines 1 through 6)				805.00
	EXPENSES S	SUMMARY		
8. From Report Numbers 1a	ınd 2, total amount of e	xpenses in		
excess of \$100				382.78
9. From Report Numbers 1	and 2, total amount of ϵ	xpenses of \$100	•	
or less + filipg fee				422.22
10. Report Number 3, total ar	nount of expenses in ex	cess of \$100		Ø
11. Report Number 3, total ar	mount of expenses of \$3	100 or less		Ø
12. TOTAL AMOUNT OF	ALL EXPENSES		•	
(add lines 7 through 11)				805.00
If no contributions or expenses are your filing officer.	listed during this Repo	rt Period, only thi	is page of th	e report needs to be filed wit
I declare under penalty of pe	rjury that the foregoing	is true and correct	· ·	
Executed on	/2000	Signature of	Candikiate)
Prescribed by Secretary of State NRS 294A.120, 294A.200				1
EL.201.003(rev. 04/00)		Total number of	hages for th	is report